Application or Docket Number											ber				
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003										284-30695W				_	
CLAIRS AUTIES TO THE TOTAL STATE OF THE TOTAL STATE								SMALL ENTITY TYPE			ОЯ			6)(
TOTAL CLAIMS			14					RAT	Ε	FEE		RATE	FEE	0	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	385.00	OR	BASIC FEE	770.00	6	
TOTAL CHARGEABLE CLAIMS			14 minus 20=		- 0			XS:	9#		OR	X\$18=		-	
INDEPENDENT CLAIMS			minus 3 =		• (X43	2		OR	X86≈		5	
MULTIPLE DEPENDENT CLAIM P			ESENT		v			+145=			OR	+290=			
If the difference in column 1 is less than zero, enter "O" in column 2						TOT	AL		OR	TOTAL	7.20	1 ·			
- 11 0		AIMS AS A				•						OTHER	THAN		
Ø)	24/05	(Column 1)		{Cotu	mn 2) (Column 3			SMA	LL ENTIT		OR 1	SMALL	ADDI-	ł	
¥ I	·	CLAIMB REMAINING AFTER		PREVI	KEST BER OUSLY FOR	PRESENT EXTRA		RA	ſΈ	ADDI- TIONAL FEE		RATE	TIONAL		
AMENDMENT	Total	AMENDMENT	Minus	-	2	B.		XS	9=		OR	X\$18=	0	1	
	Independent	. 1	Minus	***	3	\mathcal{Q}		X4:	3=		OR	X86≃	W	1	
2	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+14	5 =		OR	+290=)		
	1 5 13							ADOR	OTAL FEE		OR	TOTAL ADDIT. FEI		1	
		(Column 1)			mn 2)	(Column 3)					•		ADDI-	4	
47.8	מלדולע	CLAMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER MOUSLY D FOR	PRESENT EXTRA		RA	TE	ADDI- TIONAL FEE		RATE	TIONAL	1	
ME	Total	.27	Minus	-~	20	- 7		XS	9=	<u> </u>	OR	X\$18=			
AMENDMENT	Independent	• 3	Minus		3	1./	1	X4	(43=		OR	X86=		1	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+1-	15=		OA			1	
	1) (106							ADDI	OTAL FEE]оя	ADDIT. FE		4	
	(Column 1) (Column 2) (Column 3)										_	_		4	
IIC.		CLAIMS REMAINING AFTER		NE.	HEST MBER MOUSLY D FOR	PRESENT EXTRA		R/	ΊΈ	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE	. []	h
AMENDMENT C	Total	AMENDMENT	Minus	- ,	27	. 0	1	X	9-		OF	X\$18=	4	11	
	Independent	. 4	Minus	200	3	•	1	×	I3 =	,	OF	X86=	200.	0	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1.1	 45≈		OF				
	If the entry in column 1 is tests than the entry in column 2, write "I" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								INV		T _{OF}	7777			
	II the "Highest N	umber Previously	PRIG FOR IN 1	us and	C III INSTA		٠.		I. FEE	ppropriate	_				